

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

DENTURE INSERTION

Prepared By

Dr. Mohamed Ashour Ahmed

Lecturer of Removable Prosthodontics

Faculty of Dental Medicine

Al-Azhar University

After the dentures have been processed and deflasked

The dentures delivered to the patient following certain steps:

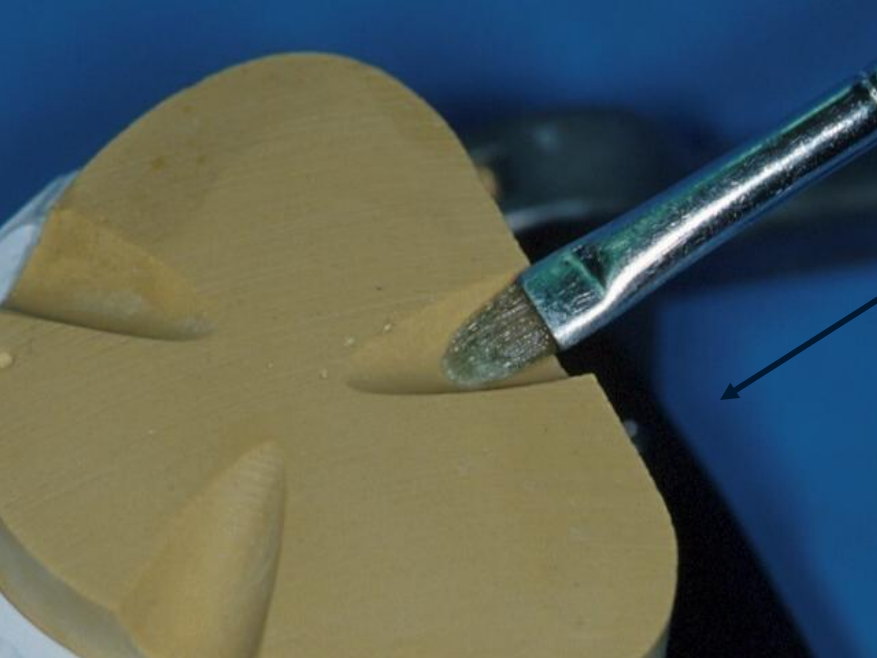
- I. Laboratory remounting**
- II. Inspection of the dentures**
- III. Insertion of the denture in the patient's mouth**
- IV. Clinical remounting**
- V. Post-insertion instructions and care**

I. Laboratory Remounting

Laboratory Remounting

procedure by which the processed dentures are returned to their previous mounting on the articulator to correct occlusal errors resulting from laboratory procedures during denture processing.



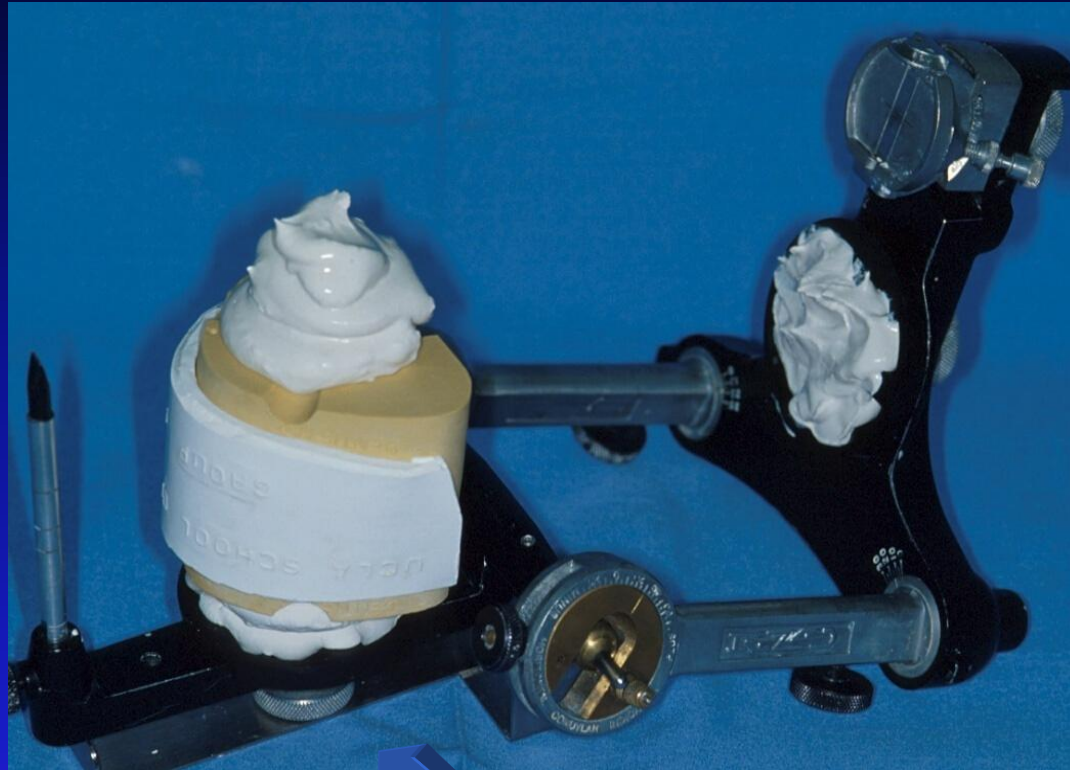


**Lightly Vaseline
Mounting Indices**

**Place Mounting Indices into the base of
the cast with an acrylic bur**



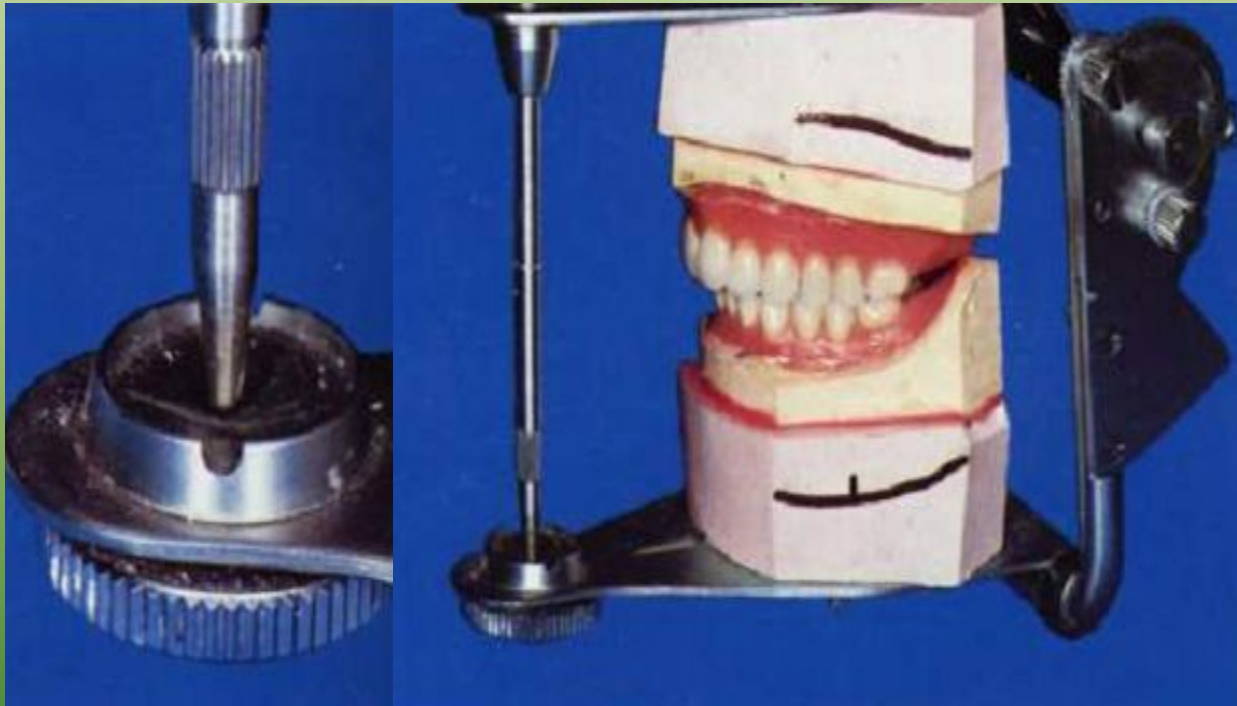
12/4/2012 2:04 PM



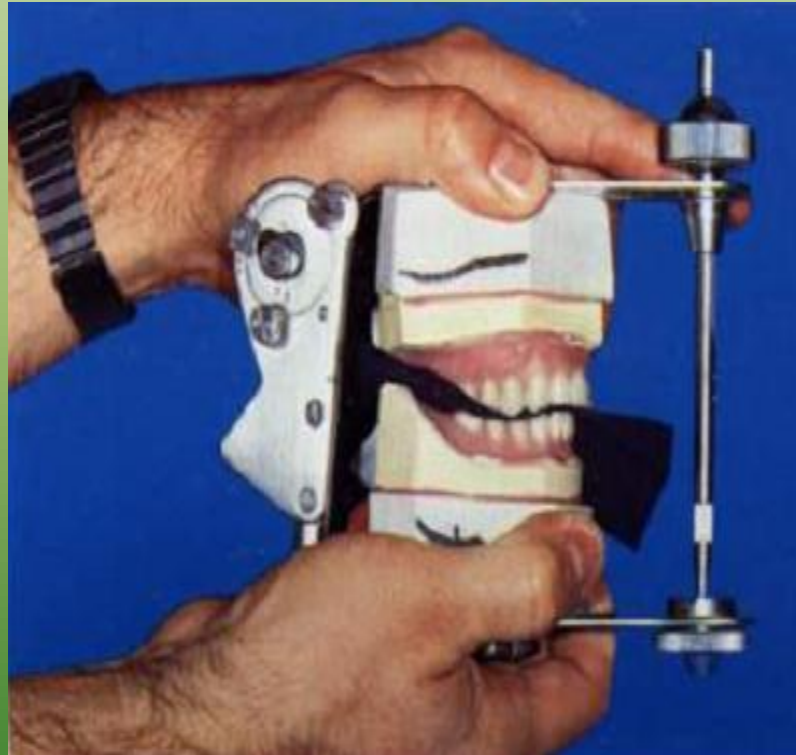
**Place Articulator into the
Inversion Stand**



Checking the OVD



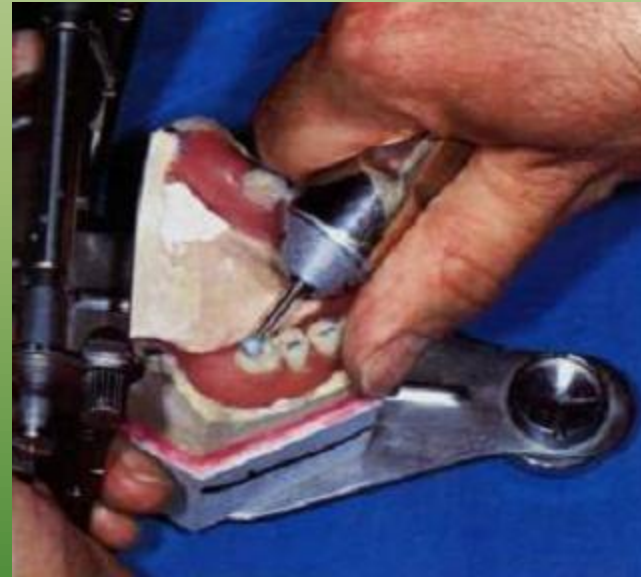
Checking the CR



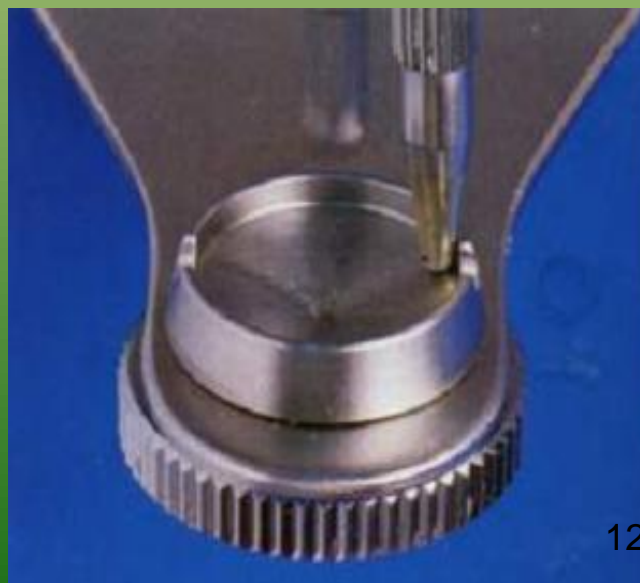
Premature Centric Contacts



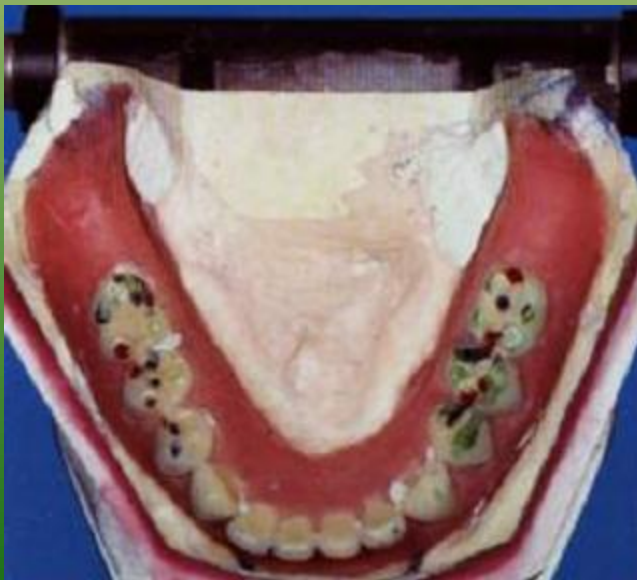
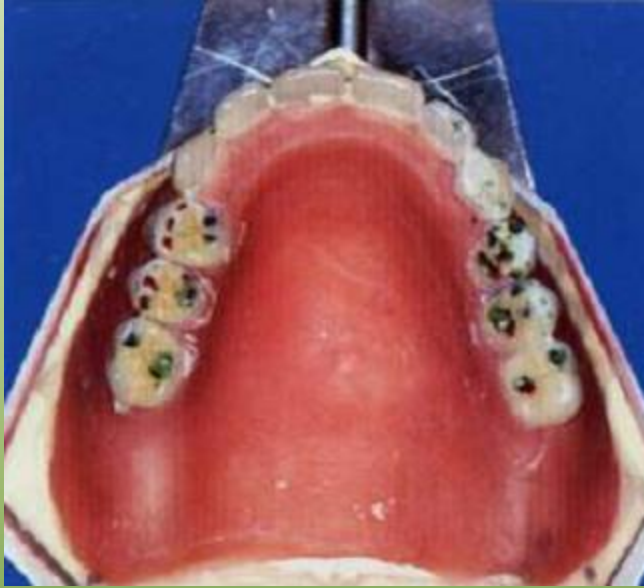
Correction of Centric Contacts



Right Lateral movement



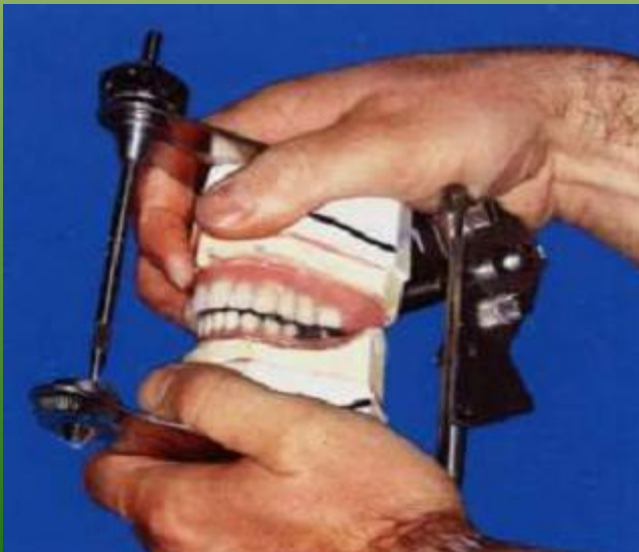
Left Lateral movement



Protrusive Movement



Finishing the Occlusion with selective grinding



12/4/2012 2:04 PM

Advantages of laboratory remounting

????

Errors in the processed denture are easily spotted on the articulator rather than in the patient's mouth

Correcting occlusal errors before denture insertion provides the patient with comfort and psychological confidence

II. Inspection of the Dentures

Inspection & Feel of the Denture



Roughness in the fitting surface



III. Dentures Placement in the Patient's mouth

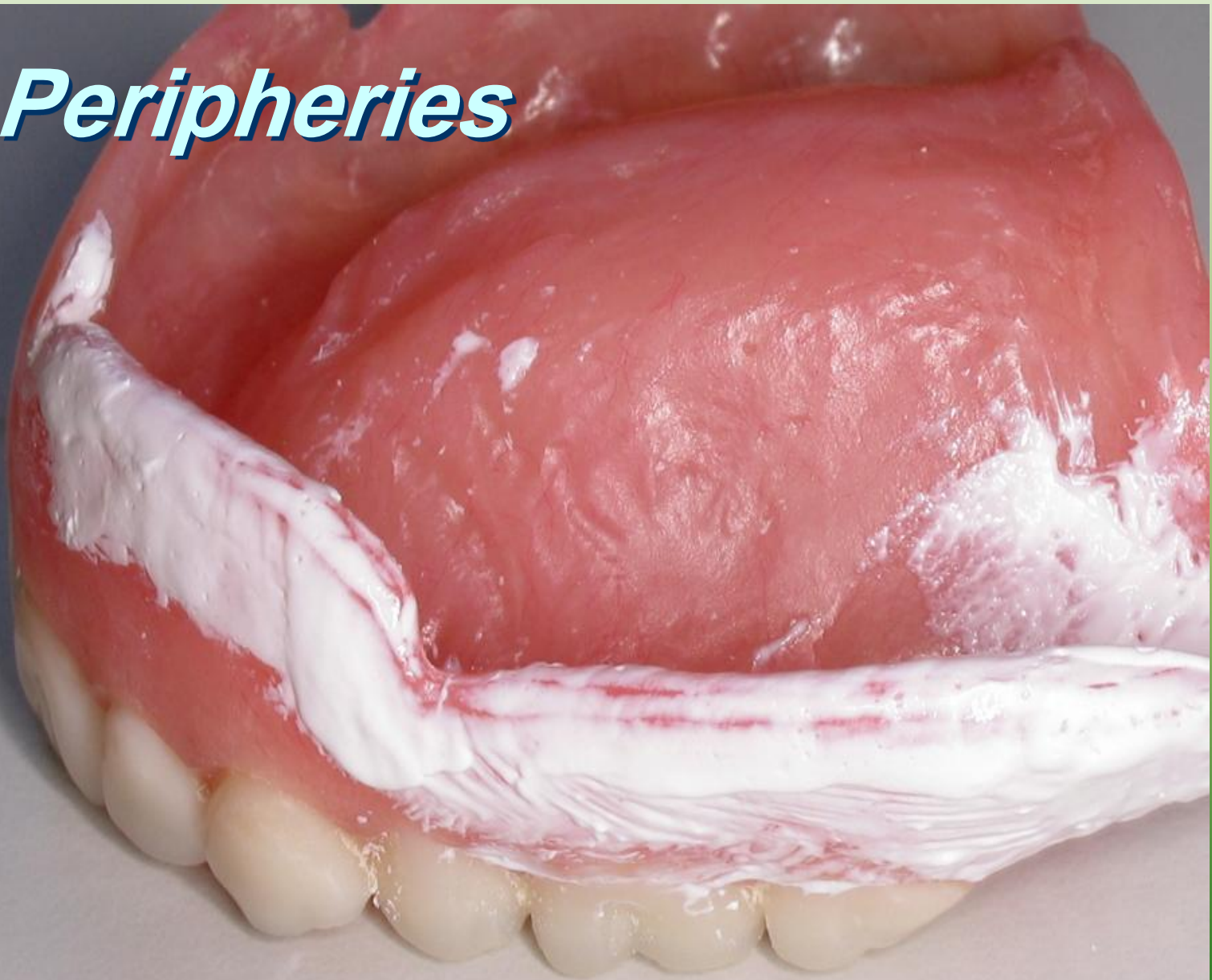
Checking roughness of fitting surface



Checking the Overextension



Peripheries



Checking Upper Labial Notch



Special Attention to Frenal Areas



12/4/2012 2:04 PM

Checking Flange Extension



Checking Buccal Frenal Notch upper



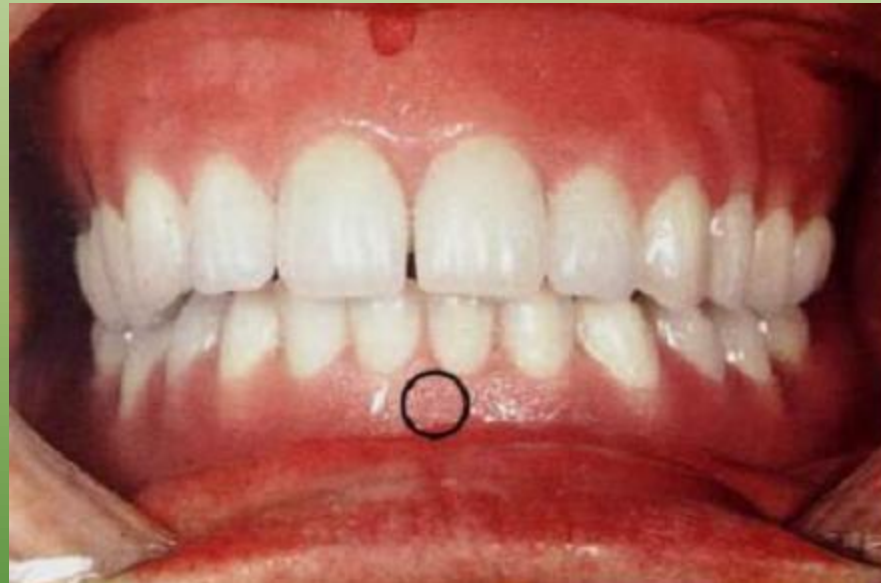
Checking Buccal Frenal Notch lower



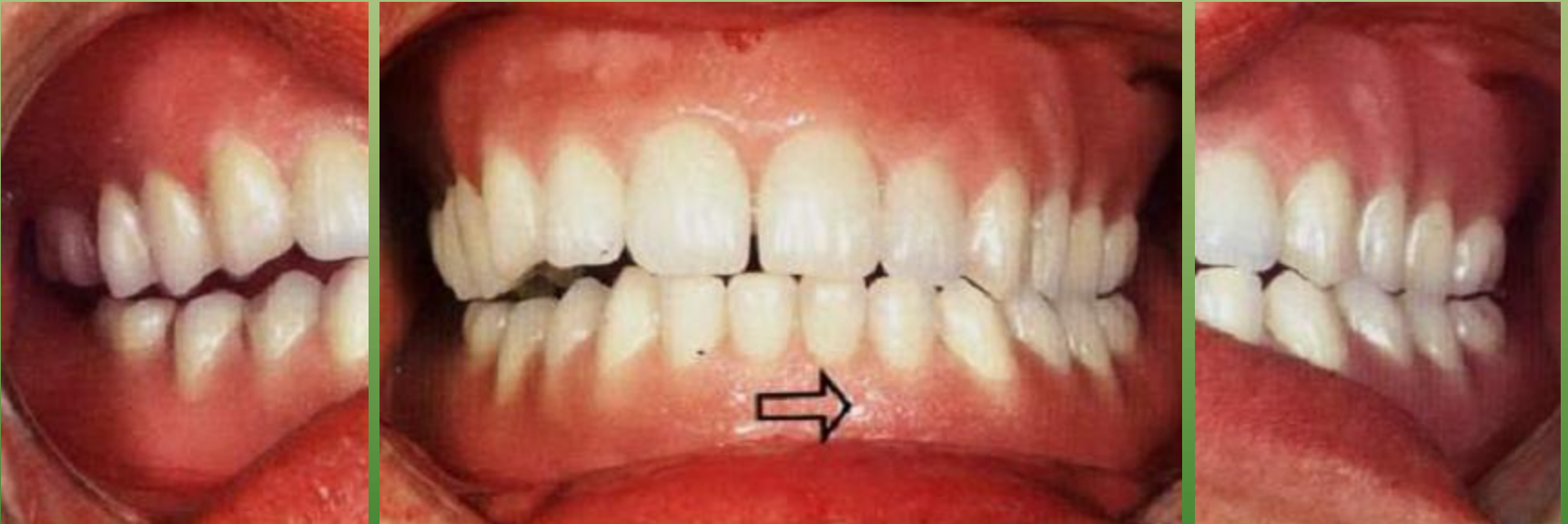
Checking Retention & Stability



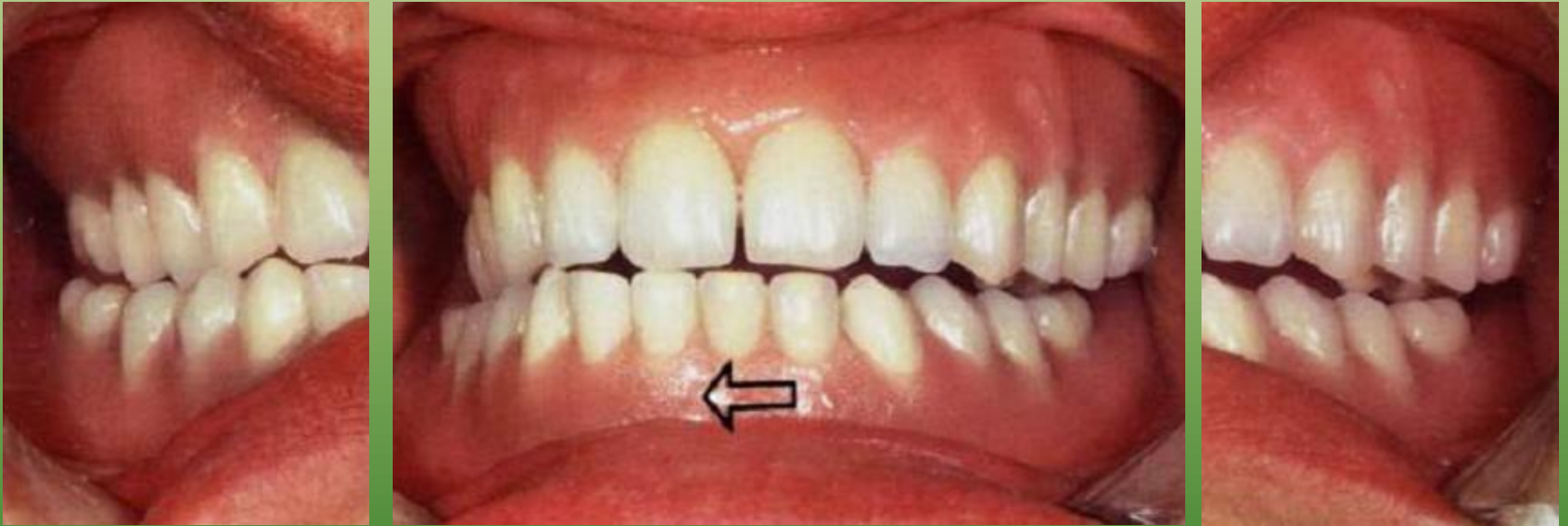
The Patient Closed in Centric Relation



The Mandible Moved to Right Side



The Mandible Moved to left Side



The Mandible Retained to Centric Relation



Occlusal errors may result due to

- ❖ Clinical errors
- ❖ Errors in mounting casts on articulator
- ❖ Errors in laboratory procedures

Treatment of occlusal disharmony

- by *selective grinding*

- Intraoral methods.
- Direct remount. (*laboratory remount*)
- Remount via new jaw relationship records. (*clinical remount*)

Intraoral methods

- **Articulating paper**
- **Wax**
- **Abrasive paste**
- **Central bearing devices** (Balancer or Correlator)



12/4/2012 2:04 PM

Checking the Occlusion with Articulating Paper



Checking the Occlusion with Wax



IV. CLINICAL REMOUNT



- Mount upper denture using remounting jig.
- Mount lower denture

Remounting Procedure



- Ask patient to bite on cotton rolls for 10 min.
- Guide mandible into CR several times.
- Aluwax is placed on the post. Teeth of the mandibular denture.



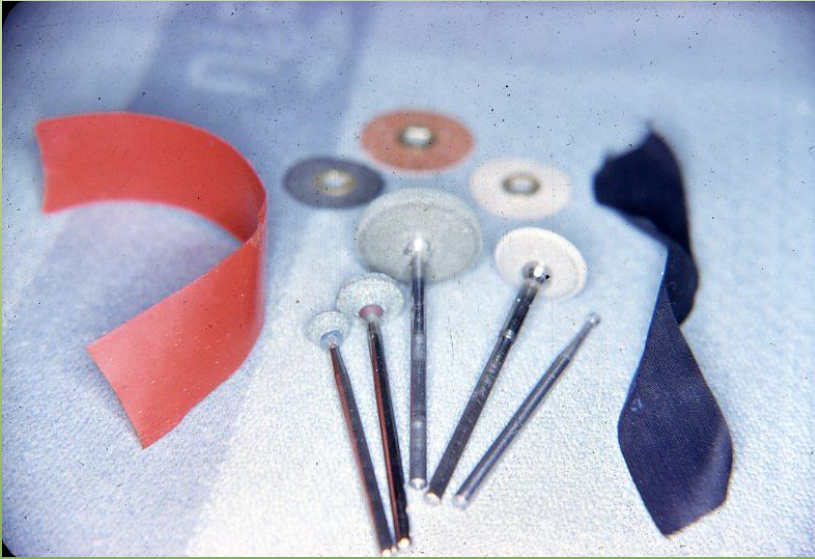
- Place both dentures in the patient's mandible is guided in a hinge movement.
- Obtain interocclusal record of CR.







Selective (spot) grinding



The art of reducing premature contacting surfaces, so that an equal pressure exists at all points with interference at no point.



Advantages of clinical remount

- Reducing patient's participation and hence better psychological reaction.
- Articulator provides a stable rather than resilient soft tissue working foundation.
- More accurate articulating paper markings
- It is easier to see, spot and correct errors on the articulator rather than in the patient's mouth.

Selective grinding rules

In centric position

Centric holding cusps

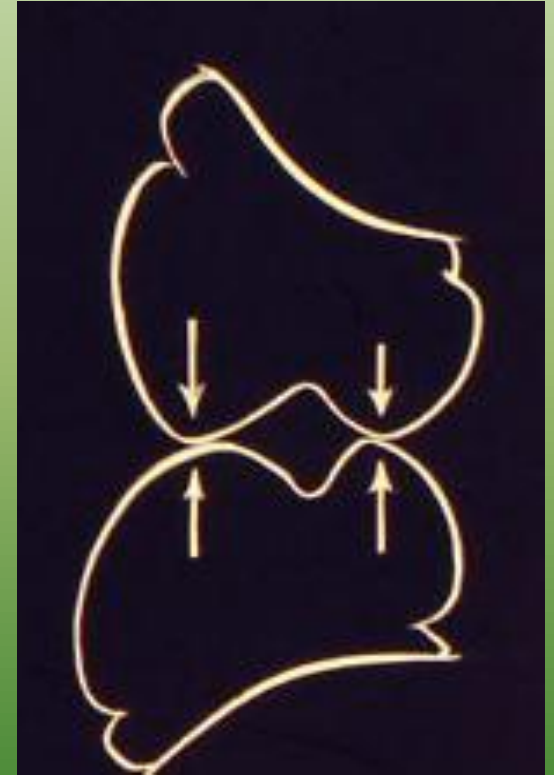
Basic Tooth Positions



Balancing Contacts

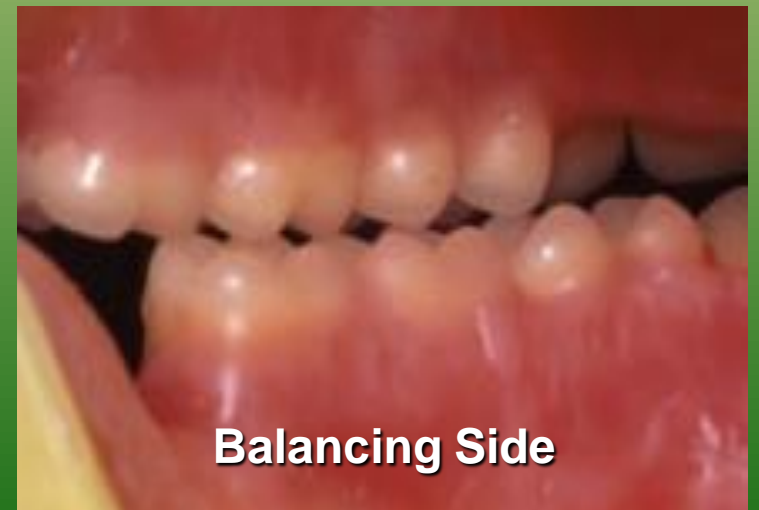


Centric Occlusion

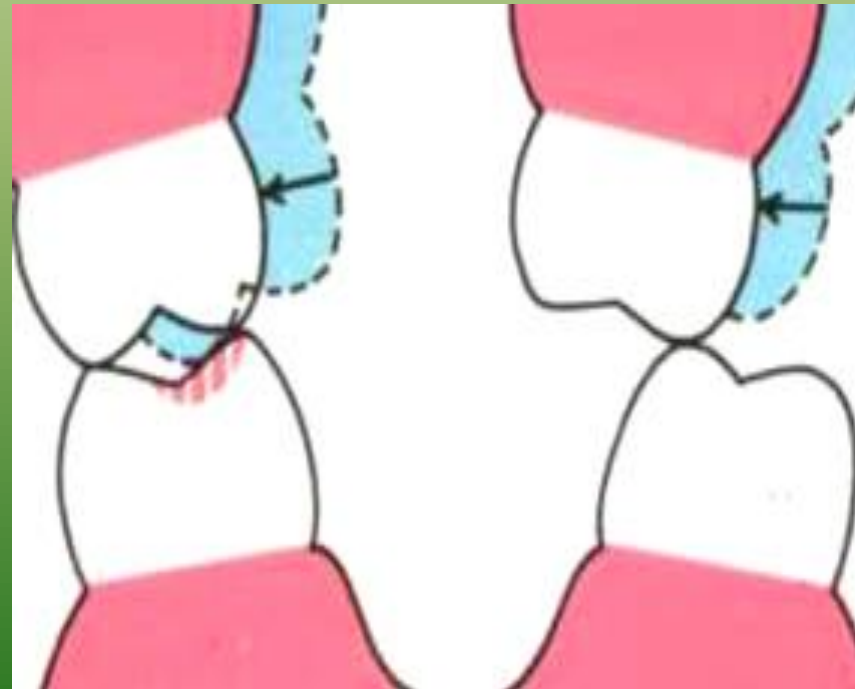
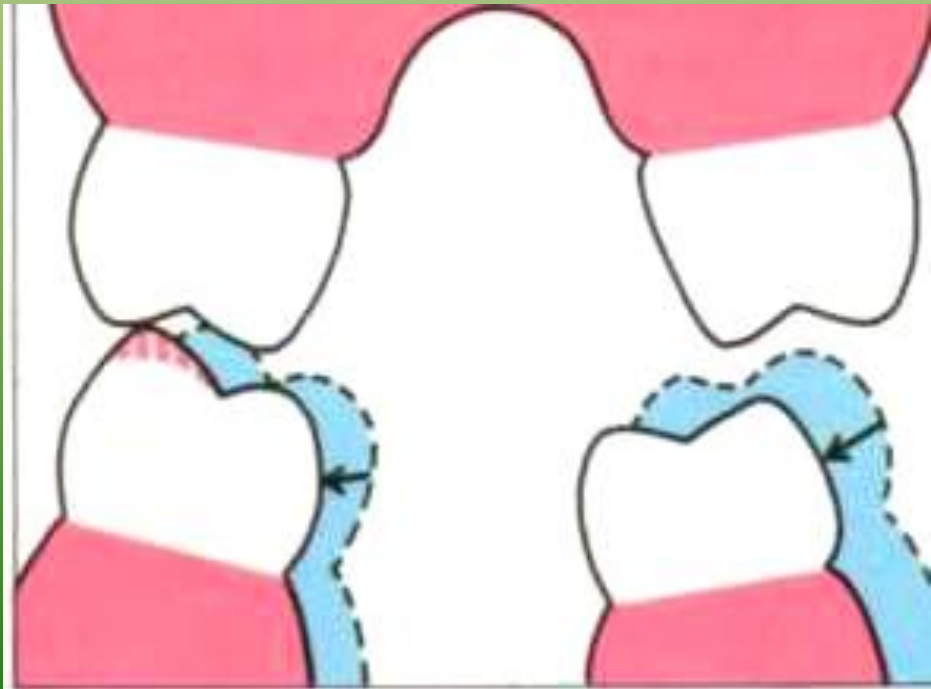


Working Contacts

Fully Balanced Anatomic Occlusion



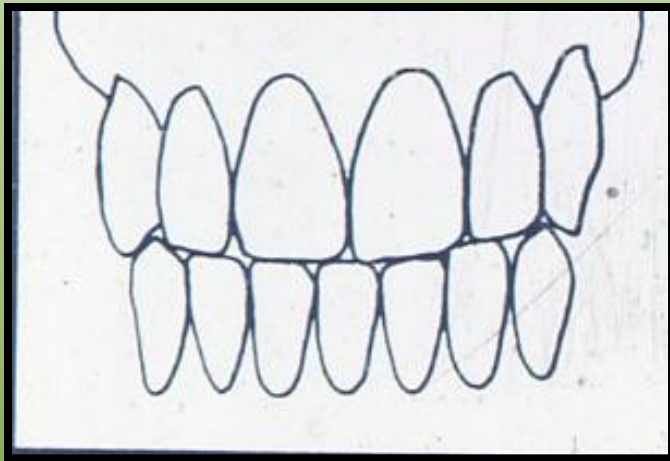
- If the cusp is high in both centric and eccentric relations, this cusp should be reduced.
- If high in centric only deepen fossa



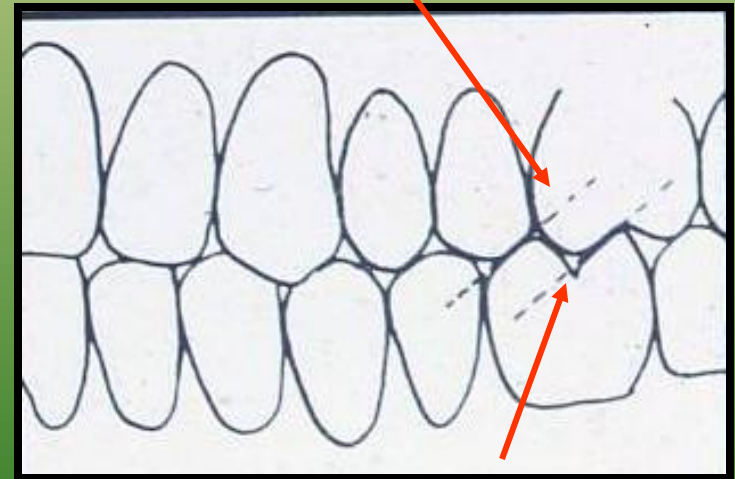
Lateral position

Bull

Correction of protrusive relation.



Distal inclines



Mesial inclines

**Management of dentures
exhibiting incorrect jaw
relations**



83 Occlusal error less than half a cusp in the antero-posterior plane.

Dentures exhibiting wrong vertical dimension

V. Post-insertion Instructions and Care

Instruction on Denture Removal



Demonstrating Masticatory Stability

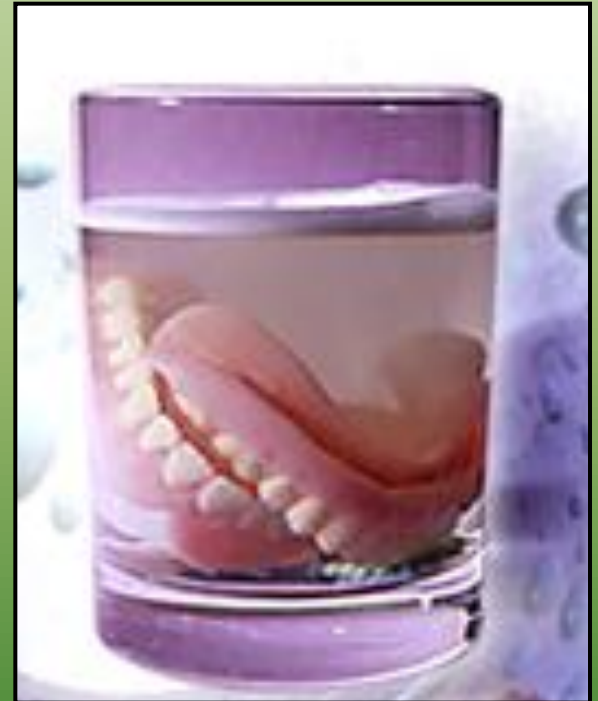


Cleaning the Denture

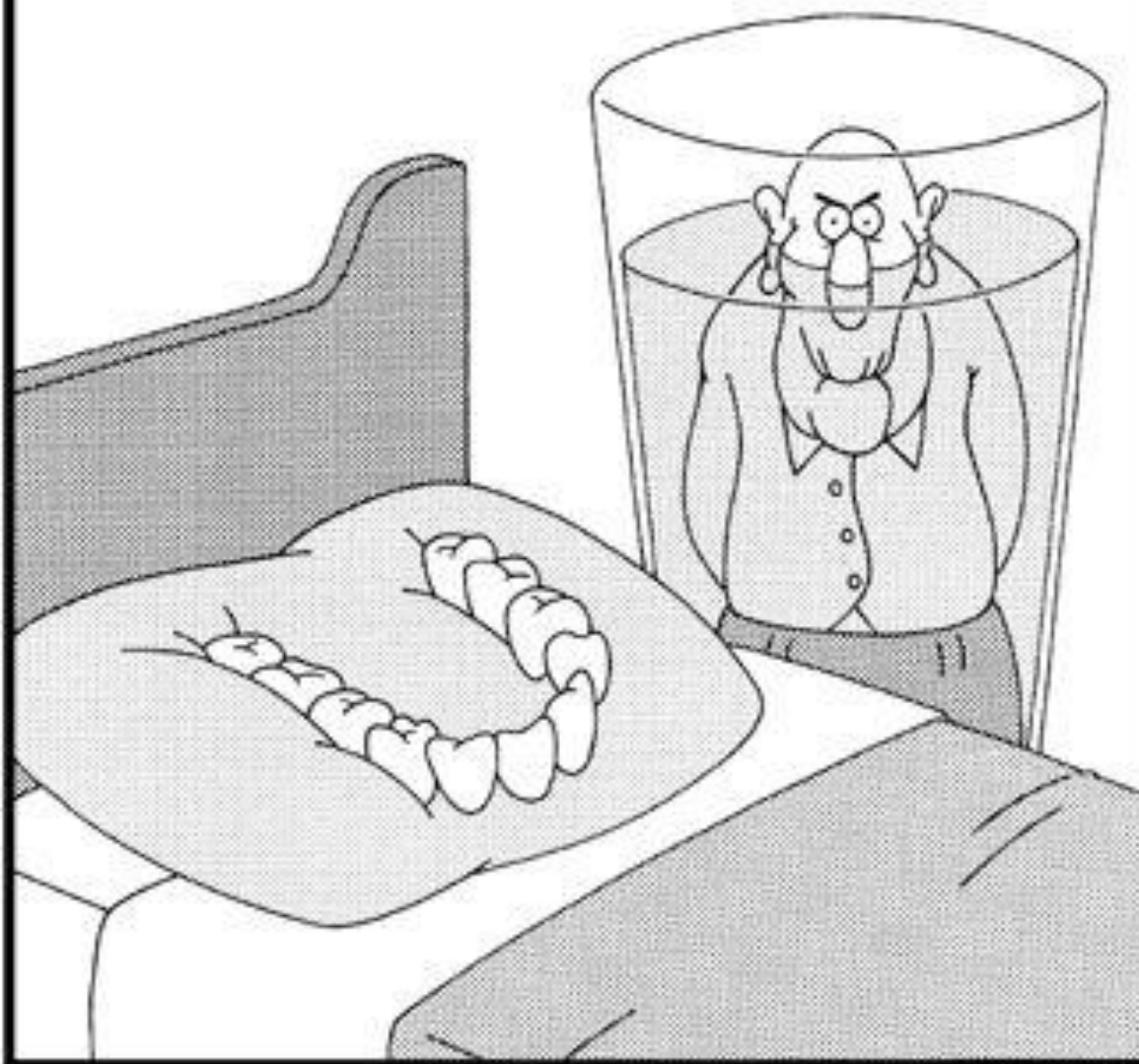


Cleaning and care for the denture

- Sonic cleaners
- Tissue conditioners
- Care for the denture
- Tissue hygiene and massage



©Aurelio Santarelli 1998



Denture dreams

THE END



12/4/2012 2:04 PM